



234<sup>th</sup>

# TOWN OF VERNON

## DEPARTMENT OF POLICE

725 HARTFORD TURNPIKE  
VERNON, CONNECTICUT 06066



Phone (860) 872-9126

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James L. Kenny  
Chief of Police

### FREEDOM OF INFORMATION FEES WAIVER REQUEST

Date: \_\_\_\_\_,

To: Records Supervisor Vernon Police Department

I have requested public records as defined by CGS 1-210. I have been advised the requested records will cost \$ \_\_\_\_\_. I am declaring under the penalty perjury that I am an indigent person. I do not have a source of income that will allow me to pay the fee. I do not have a sufficient amount of money in a bank account or other account that would allow me to pay the fee.

I request the fee be waived in accordance with CGS 1-212(4)(d)(1)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Notary Public: \_\_\_\_\_ Date Commission Expires: \_\_\_\_\_